## Request For Continued Examination (RCE) Transmittal

Address to:
Mail Stop RCE
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Application Number	10/070,006		
Filing Date	February 28, 2002		
First Named Inventor	Gilbert Wolrich et al.		
Group Art Unit	2189		
Examiner Name	Behzad Peikari		
Attorney Docket Number	10559-302US1		

This is a Request for Continued Examination (RCE) under 37 C.F.R. §1.114 of the above-identified application.

Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application. See Instruction Sheet for RCEs (not to be submitted to the USPTO) on page 2.

<ol> <li>Submission required under 37 C.F.R. §1.114 Note: If the RCE is proper, any previously filed unentered amendments and amendments enclosed with the RCE will be entered in the order in which they were filed unless applicant instructs otherwise. If applicant does not wish to have any previously filed unentered amendment(s) entered, applicant must request non-entry of such amendment(s)</li> <li>a. Previously submitted. If a final Office action is outstanding, any amendment filed after the final Office action may be considered as a submission even if this box is not checked.</li> </ol>				
<ul><li>i.  Consider the arguments in the Appeal Brief or Reply</li><li>ii.  Other</li></ul>	Brief pr	eviously f	iled on	
b. 🗵 Enclosed				
i. Amendment/Reply	iii.	$\boxtimes$	Information Disclosure Statement (IDS)	
ii.	iv.		Other	
Miscellaneous     a. Suspension of action on the above-identified application is a period of months. (Period of suspension shall not expension.)    Other				
3. Fee The RCE fee under 37 C.F.R. §1.17(e) is required by 37 C.F.R. §1.114 when the RCE is filed.				
<ul> <li>a.          \text{The Director is hereby authorized to charge the following fees, or credit any overpayments, to Deposit Account No. <u>06-1050</u></li> </ul>				
i. 🛛 RCE fee required under 37 CFR 1.17(e)				
ii.				
iii.   Other Any deficiencies				
b.   Check in the amount of \$ enclosed				
c.   Payment by credit card (Form PTO-2038 enclosed)		·		
SIGNATURE OF APPLICANT, ATTORNEY OR AGENT REQUIRED				
Name (Print/Type) Ido Rabing itch Registration No. (Attorney/Agent) L0080				
Signature IN Production Date Full 27, 2006				
		V		